# STATE OF ARIZONA

# DEPARTMENT OF INSURANCE

NOV 2 7 1996

DEPT. OF INSURANCE

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In the Matter of:	)	Docket No. 96A-223
MIDLAND RISK INSURANCE COMPANY	)	CONSENT ORDER
Respondent.	)	
	)	

Examiners for the Department of Insurance (the "Department") conducted a market conduct examination of Midland Risk Insurance Company ("Midland Risk"), NAIC #11851. The Report of the Examination of the Market Conduct Affairs alleges that Midland Risk has violated A.R.S. §§ 20-461, 20-462, 20-1631, and A.A.C. R20-6-801.

Midland Risk wishes to resolve this matter without formal adjudicative proceedings and agrees to this Consent Order.

The Director of Insurance of the State of Arizona (the "Director") enters the following Findings of Fact and Conclusions of Law, which are neither admitted nor denied by Midland Risk, and the following Order:

## FINDINGS OF FACT

- 1. Midland Risk is authorized to transact property and casualty insurance pursuant to a Certificate of Authority issued by the Director.
- 2. The Examiners were authorized by the Director to conduct a market conduct examination of Midland Risk. The on-site examination was concluded on July 5, 1995.
- 3. The Examiners reviewed 137 personal automobile policies cancelled by Midland Risk for reasons other than non-payment of premium after they had been in effect for more than 60 days, and found that 16 policies (11.7%) were terminated for reasons other than those permitted by A.R.S. § 20-1631(C). The reasons for cancellation included adverse driving record,

unacceptable driver, unacceptable vehicle, and information requested not received.

- 4. The Examiners reviewed all 57 first party automobile total loss claims settled by Midland Risk, with loss dates from April 3, 1993 through March 7, 1995. As to these, Midland Risk failed to:
- a. advise two claimants (4%) of the full amounts to which they were entitled under the provisions of their policies and pay the full amounts to settle the claims. One claimant was not notified that he had coverage for transportation expenses; the second claimant was not notified that Midland Risk would cover pre-settlement storage expenses. Midland Risk has since paid the latter claimant in the amount of the storage expenses incurred, plus interest.
- b. pay one claim (2%) within 30 days of the receipt of all information necessary for claim adjudication and did not pay interest to the claimant on the amount of the claim. Interest due has been paid in full.
- 5. The Examiners reviewed 171 third party personal auto claims settled by Midland Risk. As to these, Midland Risk failed to:
- a. complete the investigation of nine claims (5%) within 30 days of notification of the claims.
- b. respond to seven written communications from claimants (4%) within 10 working days.
  - c. promptly settle 17 claims (10%).
  - d. offer a fair settlement for five claims (3%).
- e. affirm or deny coverage on one claim (0.6%) within a reasonable time.
- 6. Midland Risk failed to respond within 15 working days to three inquiries from the Department pertaining to claims.

- 7. The Examiners reviewed 103 of the 383 personal auto claims not settled prior to the filing of litigation or arbitration. As to these, Midland Risk:
- a. failed to respond to four written communications from claimants (4%) within 10 working days.
- b. denied liability on three claims (3%) without conducting a reasonable investigation into the facts of the claims.
- c. failed to affirm or deny one claim (1%) within a reasonable time.
  - d. failed to settle four claims (4%) promptly.
- e. denied liability on one claim (1%) where the facts did not support the denial.
- f. failed to acknowledge receipt of one claim (1%) within ten working days.
- g. failed to complete investigation of two claims (2%) within 30 days after notification of the claims.

#### CONCLUSIONS OF LAW

- 1. Midland Risk violated A.R.S. § 20-1631(C) by cancelling policies of personal auto insurance which had been in effect for sixty days, for reasons other than those permitted by law.
- 2. Midland Risk violated A.A.C. R20-6-801(D)(1) and A.R.S. § 20-461(A)(6) by failing to advise claimants of the full amounts to which they were entitled under the provisions of their policies and failing to pay the full amounts to settle the claims.
- 3. Midland Risk violated A.R.S. § 20-462(A) by failing to pay interest on a first party claim at the legal rate from the date the claim was received, when the claim was not paid within thirty (30) days after

receipt of acceptable proofs of loss which contained all information necessary for claim adjudication.

- 4. Midland Risk violated A.A.C. R20-6-801(F) and A.R.S. § 20-461(A)(3) by failing to complete the investigation of claims within thirty (30) days after notification when the claim files were not documented to show that investigation could not reasonably have been completed within that time.
- 5. Midland Risk violated A.A.C. R20-6-801(E)(3) and A.R.S. § 20-461(A)(2) by failing to respond to written communications from claimants within 10 working days.
- 6. Midland Risk violated A.R.S. § 20-461(A)(6) by not attempting in good faith to effectuate prompt, reasonable settlements of claims in which liability had become reasonably clear.
- 7. Midland Risk violated A.A.C. R20-6-801(E)(2) by failing to respond within 15 working days to three inquiries from the Department pertaining to claims.
- 8. Midland Risk violated A.R.S. § 20-461(A)(4) by denying liability on three claims without conducting a reasonable investigation into the facts of the claims.
- 9. Midland Risk violated A.A.C. R20-6-801(E)(1) by failing to acknowledge the receipt of a claim within 10 working says.
- 10. Grounds exist for the entry of the provisions of the following Order.

## **ORDER**

Respondents, having admitted the jurisdiction of the Director to enter this Order, having waived the Notice of Hearing and the hearing, having waived any and all rights to appeal this Order, and having consented to the entry of this Order:

#### IT IS ORDERED THAT:

- 1. Respondents shall cease and desist from:
- a. cancelling policies of personal auto insurance in effect for sixty days, for reasons other than those permitted by A.R.S. § 20-1631(C);
- b. failing to complete the investigation of claims within thirty (30) days after notification unless the claim files are documented to show that the investigation could not reasonably have been completed within that time.
- c. failing to attempt in good faith to effectuate prompt, reasonable settlements of claims in which liability has become reasonably clear.
- 2. Within 60 days of the filed date of this Order, Midland Risk shall submit to the Director a written action plan, including procedural changes and copies of bulletins sent to employees, agents, appraisers, and adjusters, to monitor the following:
- a. that personal automobile policies which have been in effect for sixty days are cancelled or non-renewed for only the reasons permitted by A.R.S. § 20-1631(C).
- b. that all claims investigations be completed within thirty days after notification of claims and that, if not completed, the claim file be documented to explain why the investigation could not reasonably have been completed within 30 days.
- c. that Midland Risk will attempt in good faith to effectuate prompt, reasonable settlements of claims in which liability has become reasonably clear.
- 3. Within 30 days of the filed date of this Order, Midland Risk shall offer to reinstate the policies listed in Exhibit 1 of the Report of Examination (attached to this Order as Exhibit A) by letters to the insureds

in a form acceptable to the Director. A list of all insureds to whom this letter is mailed shall be filed with the Department when all letters have been mailed.

- 4. Within 60 days of the filed date of this Order, Midland Risk shall perform a self-audit of all policies in effect for at least 60 days which have been cancelled or non-renewed from March 22, 1995 through the filed date of this Order for reasons other than nonpayment of premium, cancelled. Midland Risk shall identify all instances where policies have been cancelled or non-renewed for reasons not permitted by A.R.S. § 20-1631(C) and shall report the results of the self-audit to the Department. Within 60 days of the filed date of this Order, Midland Risk shall offer to reinstate all policies which have been terminated as described above, by letters to the insureds in a form acceptable to the Director. A list of all insureds to whom this letter is mailed shall be filed with the Department when all letters have been mailed.
- 5. Midland Risk has paid interest of \$206.46 to the claimant of Claim #AZ5329.
- 6. Midland Risk has paid \$540.00 to the claimant of Claim #AZ8942, as restitution for pre-settlement storage of the damaged automobile, plus interest of \$81.00, totalling \$621.00.
- 7. Within 30 days of the filed date of this Order, Midland Risk shall reopen Claim #AZ5329 to determine the amount owing the claimant for transportation expense. Midland Risk shall pay the amount determined to be owing, plus interest at the rate of ten percent per annum from January 6, 1994 through the date the amount owing is paid. The payment shall be accompanied by a letter to the insured in a form acceptable to the Director. Documentation of the payment, giving the name and address of the party paid, the amount of the payment, the amount of interest paid, and

the date of payment, shall be provided to the Department within 40 days of the filed date of this Order.

- 8. The Department shall be permitted, through authorized representatives, to verify that Midland Risk has complied with all provisions of this Order.
- 9. Midland Risk shall pay a civil penalty of \$3,500 to the Director for deposit in the State General Fund in accordance with A.R.S. § 20-220(B). This civil penalty shall be provided to the Market Conduct Examinations Division of the ADOI prior to the filing of this Order.
- 10. The Report of Examination of the Market Conduct Affairs of Respondent as of July 5, 1995, including the letter of objection submitted by Midland Risk, shall be filed with the Department after the Director has filed this Order.

DATED at Phoenix, Arizona this day of Nound, 1996.

John King Director of Insurance 

#### CONSENT TO ORDER

- 1. Respondent, Midland Risk Insurance Company, has reviewed the attached Order.
- 2. Respondent is aware of its right to a hearing at which hearing Respondent may be represented by counsel, present evidence and cross-examine witnesses. Respondent has irrevocably waived its right to such public hearing and to any court appeals relating thereto.
- 3. Respondent admits the jurisdiction of the Arizona Department of Insurance and the Director of the Arizona Department of Insurance, and consents to the entry of this Consent Order.
- 4. Respondent states that no promise of any kind or nature has been made to induce it to enter into this Order and that it has entered into this Order voluntarily.
- 5. Respondent acknowledges that the acceptance of this Order by the Director of the Arizona Department of Insurance is solely for the purpose of settling this matter and does not preclude any other agency or officer of this state or its subdivisions or any other person from instituting proceedings, whether civil, criminal, or administrative, as may be appropriate now or in the future.
- 6. James E. Farmer, who holds the office of Executive Vice President of Midland Risk Insurance Company, is authorized to enter into this Order for it and on its behalf.

November 11, 1996 (Date)

MIDLAND RISK INSURANCE COMPANY

COPY of the foregoing mailed/delivered 1 27th day of November , 1996, to: 2 Charles R. Cohen Deputy Director 3 Gregory Y. Harris Executive Assistant Director Erin H. Klug Chief Market Conduct Examiner Saul R. Saulson Examinations Supervisor Market Conduct Examinations Division Mary Butterfield Assistant Director Life & Health Division 8 Deloris E. Williamson Assistant Director 9 Rates & Regulations Division Gary Torticill 10 Assistant Director and Chief Financial Examiner Corporate & Financial Affairs Division 11 Cathy O'Neil Assistant Director 12 Consumer Services Division John Gagne 13 Assistant Director Investigations Division 14 F. Duane Avey Fraud Unit Chief 15 Dean Ehler Supervisor 16 Property and Casualty Section 17 DEPARTMENT OF INSURANCE 2910 North 44th Street, Suite 210 18 Phoenix, AZ 85018 19 James E. Farmer, Vice President Midland Risk Insurance Company 20 825 Crossover Lane Memphis, Tennessee 38117 21 angle. Buster 22 **2**3 24 25

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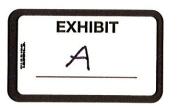
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# MIDLAND RISK Cancellation Criticisms Violation of A.R.S § 20-1631(C)

Policy Number	Policy Inception	Cancellation Reason
AZP140367	12-20-94	Info Req't Not Rec.
AZPA71283	06-30-93	и и и
AZPA81751	10-02-93	<i>n</i> u u u
AZP104722	12-28-94	и и п
AZP104343	04-18-94	H H H
AZPA86322	12-11-93	и и и
AZPA68712	06-19-93	11 11 II II
AZP104458	04-15-94	11 11 11 11
AZP144600	01-14-95	11 11 11 11
AZPA90915	01-19-94	" " " "
AZP123442	08-10-94	,, ,, ,, ,,
AZPA82745	10-19-93	Unacceptable Vehicle
AZPA70049	06-21-93	" "
AZP119785	07-18-94	. "
AZPA86271	12-10-93	Unacceptable Driver
AZP139250	12-16-94	11 17

Total 16



# **CLAIMS PROCEDURES AND PROCESSING**

Arizona claims are processed and paid in the Company's Tempe, Arizona office located at 1400 East Southern. All claims occurring in Arizona and California are handled from this office.

The claims staff in Tempe currently numbers 52, which includes those handling California claims.

Claims are sometimes reported by the Company's independent agents or its insureds. However, the majority of claims are reported by third party claimants or their attorneys.

Claims are handled by staff adjusters. **Independent adjusters** are only utilized when investigation activities outside the office are required.

Midland Risk's Arizona premium increased by over 75% from 1992 through 1995, and direct losses incurred more than tripled. The claims management staff indicated to the Examiners that staffing had not kept pace with the volume of claims. During the last few months Midland Risk has hired additional experienced claims adjusters from Companies who are closing their Phoenix claims operations. The current staff of 52 is twice the number of claims personnel of a year ago.

## **SUBROGATION**

**Subrogation**, where warranted, is actively pursued and the first consideration of recovered funds is to return the insured's deductible or the pro-rated amount.